



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 8286

|  |   |                                    |   |   |
|--|---|------------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>10/540,299   | <b>FILING OR 371(c) DATE</b><br>12/08/2005<br><b>RULE</b>   | <b>CLASS</b><br>435                | <b>GROUP ART UNIT</b><br>1744   | <b>ATTORNEY DOCKET NO.</b><br>SPM-390-A |
| <b>APPLICANTS</b><br>Robert Puskeiler, Munich, GERMANY;<br>Dirk Weuster-Botz, Dachau, GERMANY;<br>Karl-Heinz Zacher, Buch am Buchrain, GERMANY;  |   |                                    |   |   |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/EP03/14752 12/22/2003  |   |                                    |   |   |
| <b>** FOREIGN APPLICATIONS *****</b><br>GERMANY 10260691.9 12/23/2002  |   |                                    |   |   |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |   | <b>STATE OR COUNTRY</b><br>GERMANY | <b>SHEETS DRAWING</b>   | <b>TOTAL CLAIMS</b><br>54               |
| Verified and Acknowledged<br>Examiner's Signature _____ Initials _____   |   | <b>INDEPENDENT CLAIMS</b><br>1     |   |   |
| <b>ADDRESS</b><br>Andrew R Basile<br>Young & Basile<br>Suite 624<br>3001 West Big Beaver Road<br>Troy, MI 48084  |   |                                    |   |   |
| <b>TITLE</b><br>Device and method for parallel, automated cultivation of cells in technical conditions   |   |                                    |   |   |
| <b>FILING FEE RECEIVED</b><br>2960   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                    | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |